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MENT	PAT	ENT	APPLIC		V FEE DET ute for Form P		N RECORD		Applic	ation or Docket N	umber
	APPLICATION AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER SMALL	
	FOR		NUMBER FILED		NUMB	NUMBER EXTRA		FEE (\$)		RATE (\$)	FEE (\$)
	IC FEE CFR 1.16(a), (b), or	(c))		N/A		N/A	RATE (\$) N/A		1	N/A	
SEA	RCH FEE CFR 1.16(k), (i), or (i			N/A	,	N/A	N/A		1	N/A	
EXA	MINATION FEE	ì		N/A ·		N/A	N/A	 	1	N/A	
(37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS (37 CFR 1.16(i))			minus 20		0	_ .			OR	x =	
IND	EPENDENT CLA	IMS	minus 20 =				x =		1 ~		
(37 (CFR 1.16(h))		If the specification and			exceed 100	× =	1	1	X =	
APP FEE	LICATION SIZE					size fee due					
	CFR 1.16(s))		additiona	1 50 shee	ets or fraction th	nereof. See				<u> </u>	
-	•)(G) and 37 CF	R 1.16(S).	 	1	1		
MUL	TIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						N/A	<u> </u>	4	N/A	
* if ti	ne difference in column 1 is less than zero, enter "0" in column 2.						TOTAL			TOTAL	
	APPL	LICAT	ION AS	AMEND	ED – PART I						
									OR	OTHER	
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST					(Column 3)	SMALL	ENTITY	7	SMALL	ENTITY
∢		RE	MAINING		NUMBER PREVIOUSLY	PRESENT EXTRA	RATE (\$)	ADDI- TIONAL		RATE (\$)	ADDI- TIONAI
AMENDMENT			NTER NDMENT		PAID FOR	EXIIVA		FEE (\$)			FEE (\$
	Total (37 CFR 1.16(i))	' !	19	Minus	["] 30	- 19	x 25=	475	OR	х =	
	Independent (37 CFR 1.16(h))	•	10	Minus	^{**} 5	5	×100 =	500	OR	x =	
	Application Size Fee (37 CFR 1.16(s))]		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(ii))						N/A		OR	N/A	
						· · ·	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	ł
		(Co	lumn 1)		(Column 2)	(Column 3)			•		
ТВ			LAIMS		HIGHEST	PRESENT	DATE (\$)	ADDI	1	DATE (\$)	ADDI
		△	MAINING AFTER		NUMBER PREVIOUSLY	EXTRA	RATE (\$)	ADDI- TIONAL		RATE (\$)	ADDI- TIONAI
ĒN	Total	AME	NDMENT	Minus	PAID FOR	=	V	FEE (\$)	1		FEE (\$
AMENDMENT	(37 CFR 1.16(i)) Independent	*		Minus	***		x · =		OR	X =	
	(37 CFR 1.16(h)) Application Size Fee (37 CFR 1.16(s))					1	x =	 	OR	x =	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(ii))						À1/A	1	1	N/A	
			mocini-ci				N/A	+	OR	N/A TOTAL	<u> </u>
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".